Public Health Data Standards Consortium

http://www.phdsc.org

PUBLIC HEALTH DATA
STANDARDS CONSORTIUM

PHDSC

Promoting Standards Through Partnerships

National Committee on Vital and Health Statistics (NCVHS)
Standards Subcommittee and
Subcommittees on Population Health and Privacy, Confidentiality and Security,
November 12, 2013

Hearing on Public Health Data Standards

Testimony by the
Public Health Data Standards Consortium

Anna O. Orlova, PhD
aorlova@jhsph.edu
Executive Director
Public Health Data Standards Consortium and
Visiting Associate Professor, Johns Hopkins School of Medicine
Baltimore, Maryland, USA

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

1. Current state of public health related standards; coordination of standards development activities; representation and participation by public health in standards activities; where is public health strongest and where is weakest?

Public Health, as well as the healthcare industry at large, are in a very early state of HIT standardization.

Though HIT standards in Public Health have been under development for more than two decades, the development of ***interoperability standards,*** i.e., ensemble (grouping) of various standards aimed to support business needs for collecting and sharing public health information, have started only in the last decade, specifically under the activities of the Health Information Technology Standards Panel (HITSP) and the Integrating the Healthcare Enterprise (IHE).

1. Current state of public health related standards; coordination of standards development activities; representation and participation by public health in standards activities; where is public health strongest and where is weakest?

According to the Public Health Reporting Reference Implementation Framework developed by the Public Health Reporting Initiative of the ONC S&I Framework, only seven public health programs had started working on interoperability standards. They are

- communicable diseases [case reporting and laboratory reporting],
- early hearing detection and intervention (EHDI),
- cancer,
- immunization,
- healthcare associated infections (HAI),
- vital records and
- adverse event reporting

In the last year, the work on interoperability standards for administrative data and obesity data had started at IHE.

Source: Public Health Reporting Initiative (PHRI). ONC Standards & Interoperability (S&I) Framework. PHRI Reference Implementation Framework. 2013. URL: http://wiki.siframework.org/Public+Health+Reporting+Initiative

1. Current state of public health related standards; coordination of standards development activities; representation and participation by public health in standards activities; where is public health strongest and where is weakest?

PHDSC has been advocating for the need of coordination for standards development , specifically, and HIT standardization, in general, for Public Health since its inception.

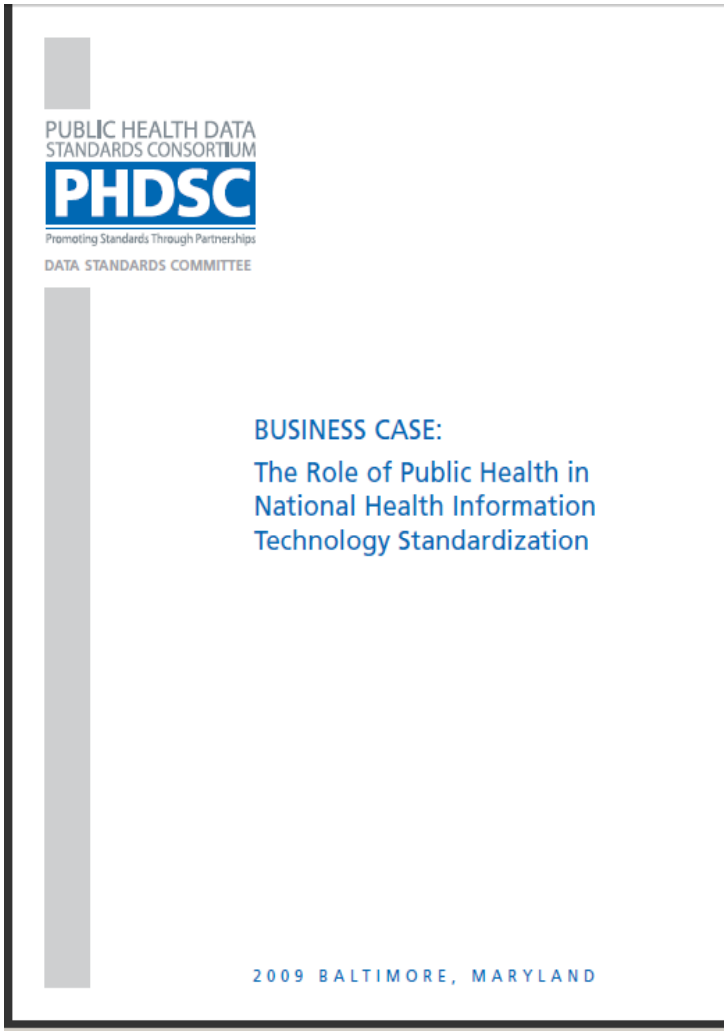
The methodology for such coordination has been described in 2009 in the ***PHDSC Business Case on the Role of Public Health in HIT Standardization***.

Source: Public Health Data Standards Consortium (PHDSC). Business Case on the Role of Public He
HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Methodology for Participation and Coordination of HIT Standardization for Public Health

Developed in 2009 through the CDC Cooperative Agreement.



Source: Public Health Data Standards Consortium (PHDSC). Business Case on the Role of Public Health in HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

1. Current state of public health related standards; coordination of standards development activities; representation and participation by public health in standards activities; where is public health strongest and where is weakest?

PHDSC has been advocating for the need of representation and participation in the standardization activities for Public Health since its inception.

The methodology for such participation has been described in 2009 in the ***PHDSC Business Case on the Role of Public Health in HIT Standardization***.

Source: Public Health Data Standards Consortium (PHDSC). Business PHDSC Business Case on the Role of Public Health in HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Health IT Standardization Phases & Entities

- Priority Setting

- Standard Development and Maintenance

- Standards Harmonization
- and Testing

- Standards Certification

- Standards Adoption

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

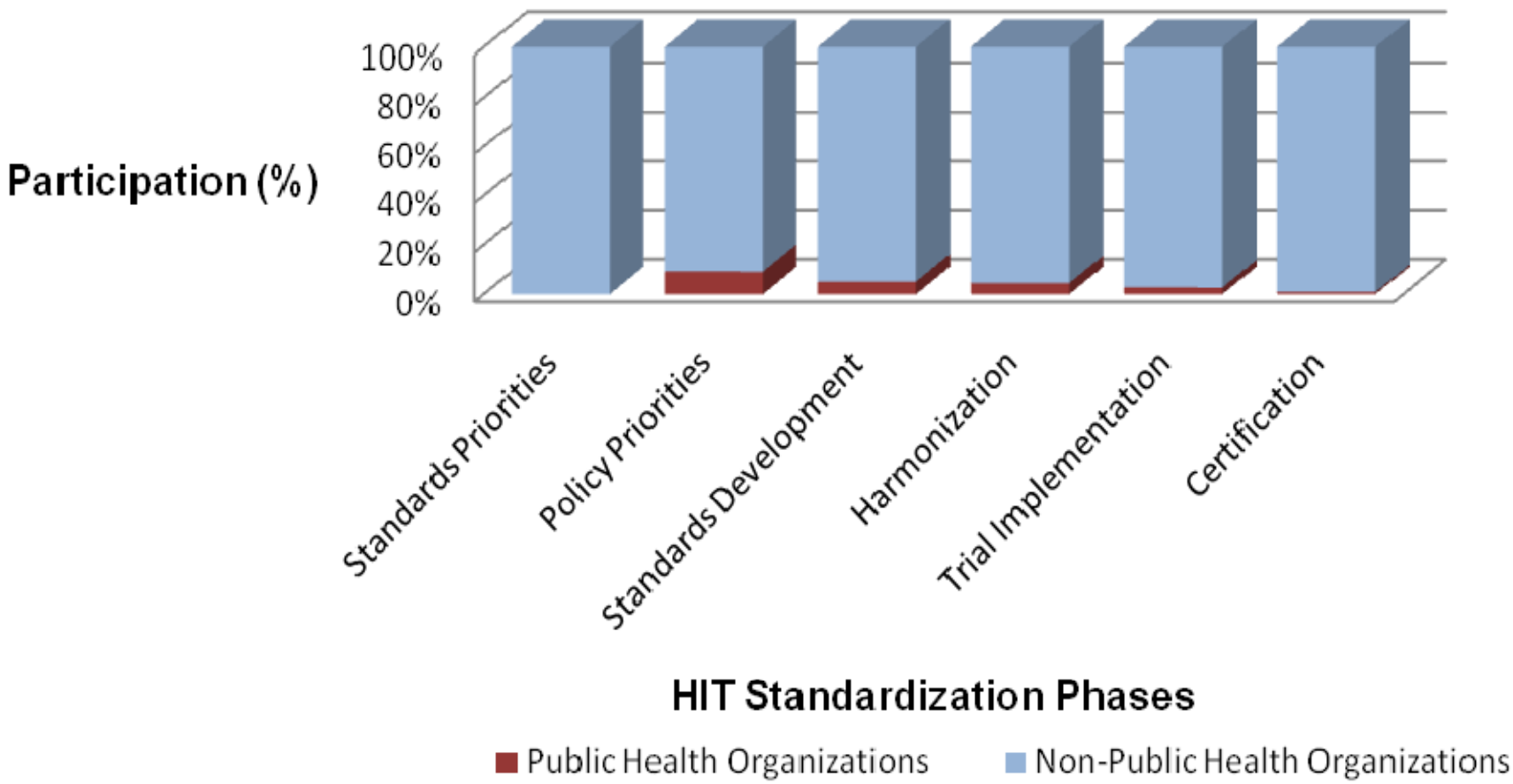
Health IT Standardization Phases & Entities

•Priority Setting	***Past:*** **American Health Informatics Community (AHIC)** ***Now*****: HIT Policy Committee & HIT Standards Committee**
•Standard Development and Maintenance	**Standards Development Organizations (HL7, INTSDO, LOINC, DICOM, CDISC,X12, etc.)**
•Standards Harmonization •and Testing	***Past*****: Health Information Technology Standards Panel (HITSP)** ***Now*****: Integrating Healthcare Enterprise (IHE)** **ONC Standards and Interoperability (S&I) Framework**
•Standards Certification	**ONC Authorized Certification Bodies**
•Standards Adoption	**US**

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Public Health in HIT Standardization Entities

Public Health participation in HIT Standardization entities is very low and did not improve since 2009



PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

PHDSC Business Case: HIT Standardization Phases, Products and Entities						
HIT Standardization Phases	**Needs & Priorities**	**Development & Maintenance**	**Selection & Harmonization**	**Testing/Trial Implementation**	**Certification**	**Deployment**
Goals	*What should be accomplished ?*	*What are the standards?*	*What standards to use?*	*Show what can be accomplished*	*Certify standards-based products*	*Deploy standards-based products*
HIT Standards and Interoperability Framework Development Entities	HIT Policy Committee HIT Standards Committee (*Formerly AHIC, to be superseded pending ONC decisions*)	SDOs (e.g., HL7, SNOMED (IHTSDO), LOINC, ASC X12, NUBC, ISO TC215)	IHE ONC S&I Framework, e.g., Public Health Reporting Initiative (PHRI)	IHE Connectathon	ONC Authorized Certification Entities (CCHIT, Drummond Group, Inc)	ONC S&I Pilot Projects PHDSC-CDC Pilot Projects
Standards Documents	Use Cases (Description of the health information exchanges)	Standards	Interoperability Specifications Technical Frameworks Integration Profiles	Test Reports	Certification Criteria Certified Products List	Deployment Reports

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

PHDSC Business Case: HIT Standardization Phases, Products and Entities						
HIT Standardization Phases	**Needs & Priorities**	**Development & Maintenance**	**Selection & Harmonization**	**Testing/Trial Implementation**	**Certification**	**Deployment**
Goals	*What should be accomplished ?*	*What are the standards?*	*What standards to use?*	*Show what can be accomplished*	*Certify standards-based products*	*Deploy standards-based products*
HIT Standards and Interoperability Framework Development Entities	HIT Policy Committee HIT Standards Committee (*Formerly AHIC, but superseded pending ONC decisions*)	SDOs HL7, SNOMED LOINC, ASC X12 TC215)	IHE Framework	Connectathon	ONC Authorized Certification (CCHIT, Group, Inc)	ONC S&I Pilot Projects PHDSC-CDC Pilot Projects
Standards Documents	Use Cases (Description of the health information exchanges)	Standards HAI	Specifications Formal Integration	Test Reports	Functional Profiles Certification Criteria Certified Products List	Deployment Reports HAI

Early Hearing Detection and Intervention (EHDI)

Communicable Diseases

Cancer

Vital Records

Immunization

Adverse Event Reporting

Admin Data Reporting

Occupational Health

Obesity

Based on the standards-readiness assessment, the Community-led Public Health Reporting Initiative, ONC S&I Framework identified 7 domains (in purple ovals) that had been working on standardization of public health reporting.

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

1. Current state of public health related standards; coordination of standards development activities; representation and participation by public health in standards activities; where is public health strongest and where is weakest?

Wherever public health programs come to the standardization process, they demonstrate high professionalism and commitment to serve the business needs of their programmatic public health communities. At the standardization tables at HL7, IHE, S&I PHRI and others we see strong efforts from the participating public health programs to collaborate with each other in the standard development process, harmonize program-specific standards, and learn about technologies that will enable electronic data reporting from EHR systems, and data sharing and re-use, implementing the "***collect once use many times***."

The weakest areas for public health standardization are the following:

- ***very low participation*** of public health programs from the Federal, State and Local agencies in the standards harmonization efforts, the development, testing and deployment of interoperability standards
- ***absence of support for coordination and facilitation of public health standardization*** from the Federal, State and Local governments
- ***absence of certification program*** for public health information systems
- ***continued siloed approaches*** in HIT standardization for some programs

"Limited or non-participation by federal, state and local public health representatives in national HIT standardization ultimately means that public health needs for interoperable clinical and public health information systems are not served in the standards-based certified HIT products."

Source: Public Health Data Standards Consortium (PHDSC). Business Case on the Role of Public Health in HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

2. What are the incentives and drivers for adopting and using public health data standards; what are the barriers and challenges?

The incentives and drivers for adopting and using HIT standards in public health are the same as the ones for the healthcare at large.

Standards will

facilitate the electronic sharing of data among health care providers and public health agencies to achieve the efficiencies of the agency operations, potential cost savings and quality improvements in delivering public health interventions, care coordination and public health response to the current and emerging public health threats.

enable the robust and secure infrastructure capable to prevent any misuse of sensitive patient information.

"As hundreds of thousands of providers, from small family practitioners to very large hospital systems, all need to be using a network and IT infrastructure that allows for the sharing of information," the public health agencies will be able to become an equal and reliable partner and user of such infrastructure.

Source: Thune J, Alexander L, Roberts P, Burr R, Coburn T, Enzi M. Reboot: Re-Examining the Strategies Needed to Successfully Adopt Health IT. White Paper. US Senate. April 13, 2013.

2. What are the incentives and drivers for adopting and using public health data standards; what are the barriers and challenges?

Without standards, the current non-standardized public health IT infrastructure:

- ***Threatens public health data gathering activities*** as fragmented public health information systems are unable to receive data electronically from clinical systems (EHR systems, LIMS, pharmacy systems, etc.)
- ***Diminishes effectiveness of public health interventions*** as underreporting – caused by the inability to receive/exchange data electronically – reduces timeliness and effectiveness of public health services and responses, negatively affecting public safety
- ***Diminishes efficiency*** of public health operations due to continued redundancy of data gathering across programs and outdated information technology
- ***Reduces ability to communicate public health information back to clinicians*** electronically in real-time to inform clinical decisions, e.g., population health status and disease surveillance reports; information about public health resources; public health guidelines and recommendations; health educational materials; and other
- ***Jeopardizes adoption of modern interoperable HIT applications in public health***, as these applications lack functionality needed to address public health needs
- ***Jeopardizes achieving population-level healthcare goals*** as public health lacks the capacity to participate in electronic regional and nationwide health information exchanges with clinicians and cannot effectively provide population health information
- ***Minimizes the potential of state and local public health entities to receive funding from federal and other sources*** that will likely mandate use of interoperable HIT products
- ***Leaves the general population needlessly at-risk*** when lack of standardization means that public response to disaster, emerging threats (bio-terror, SARS, pandemic flu) is "invisibly handicapped."

Source: Public Health Data Standards Consortium (PHDSC). Business Case on the Role of Public Health in HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

2. What are the incentives and drivers for adopting and using public health data standards; what are the barriers and challenges?

We have identified seven barriers for adopting and using HIT standards in Public Health:

1. ***Lack of awareness about what standards to use and how to use them*** in the current fragmented public health information systems
2. ***Absence of coordination and facilitation*** of public health HIT standardization from the Federal government
3. ***Lack of federal, state and local agencies participation in the national HIT standardization activities*** to inform standard developers about public health needs
4. ***Limited ability to be involved in national efforts as federal, state and local agencies serve particular jurisdictions*** *or reflect* ***limited knowledge of needs in other jurisdictions, programs, and level***s of Public Health
5. ***Difficulty in identifying standardization entities (too many of them)*** that provide the greatest opportunity for addressing federal, state and local public health needs
6. ***Lack of technical knowledge and informatics skills*** to participate in the technical dialogue and to effectively translate public health needs into technical HIT standards
7. ***Lack of funding*** to support HIT standardization in Public Health and agencies' participation in HIT standardization.

These challenges, in turn, lead to

- ***Insufficient number of standards*** to serve public health needs
- ***Low level of maturity of existing standards***
- ***Low penetration (adoption) of standards-based products*** in public health information systems

Source: Public Health Data Standards Consortium (PHDSC). Business Case on the Role of Public Health in HIT Standardization. 2009. URL: http://www.phdsc.org/standards/business_case.asp

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

3. What is the state of information exchanges of public health data from EHR systems; what are the standards being used; what are the drivers, and incentives; what are the challenges and issues?

Public Health is in the piloting stage of information exchanges with EHR systems.

MISSION

Bring a common voice from the public health community to the national efforts of standardization of healthcare and population health information

PROGRAM AREAS

Standards Development and Harmonization

Enable public health agencies and healthcare organizations to exchange data in real time

Health Information Exchanges

Foster awareness, partnerships and collaboration at the local, state and national levels

Privacy and Security

Address individual and organizational privacy and security issues related to maintaining and sharing health information

Workforce Development

Provide continuing education in Public Health Informatics and Health IT standards

CONTACT US

www.phdsc.org

PUBLIC HEALTH DATA STANDARDS CONSORTIUM

PHDSC

Promoting Standards Through Partnerships

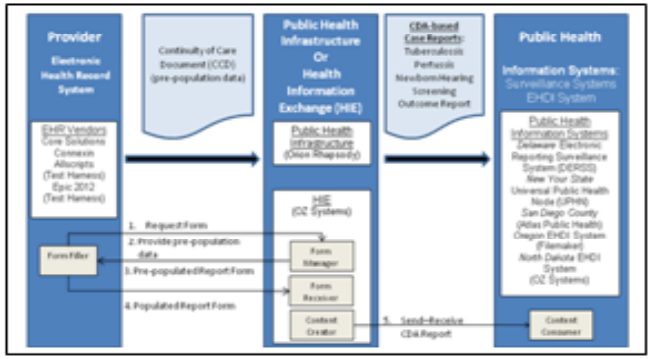
Deploying Interoperability Standards in Public Health: Pilot Projects

Pilot Projects for Communicable Disease Reporting

In May 2012, PHDSC completed pilot projects for reporting cases of communicable diseases from clinical Electronic Health Records Systems (EHR-S) to public health surveillance systems in three jurisdictions:

- ***State of Delaware*** *(Tuberculosis)*
- ***State of New York*** *(Pertussis)*
- ***San Diego County*** *(Pertussis)*

PUBLIC HEALTH REPORTING ARCHITECTURE



Pilot Projects for Early Hearing Detection and Intervention

In May 2013 PHDSC completed pilot projects to demonstrate electronic data exchange between EHR-S and Public Health Early Hearing Detection and Intervention (EHDI) program information systems in two jurisdictions:

- ***State of Oregon*** *(Newborn Hearing Screening Outcome Report from Birthing Facility to State EHDI)*
- ***State of North Dakota*** *(Early Hearing Care Plan from State EHDI to Pediatrician)*

INTEROPERABILITY STANDARDS AND ACTORS

HL7 Continuity Care Document Standard
(Actors: Content Creator)

HL7 Clinical Document Architecture Release 2 (CDA R2) Standard
(Actors: Content Creator and Content Consumer)

IHE Early Hearing Care Plan (EHCP) Content Profile
(Actors: Content Creator and Content Consumer)

HL7 Implementation Guide for CDA Release 2 on Public Health Case Reporting, Release 1
(Actors: Content Creator and Content Consumer)

IHE Retrieve Form for Data (RFD) Integration Profile
(Actors: Form Manager, Form Filler and Form Receiver)

IHE Cross-enterprise Document Reliable Interchange (XDR) Integration Profile (Actors: Content Creator and Content Consumer)

MORE INFORMATION

Communicable Disease CDA Pilot Project Report. 2012. URL: https://wiki.phdsc.org/index.php/CDA

EHDI CDA Pilot Project Report. 2013. URL: https://wiki.phdsc.org/index.php/EHDI-Pilot

This project was supported through the CDC Cooperative Agreement #SU38HM000459-05

3. What is the state of information exchanges of public health data from EHR systems; what are the standards being used; what are the drivers, and incentives; what are the challenges and issues?

The ***incentives and drivers*** for our pilot projects were to obtain knowledge and hands-on experience with EHR-based reporting to public health.

Based on our limited experience, we believe that the ***main incentive and driver*** for the use of EHR technology is the ability to exchange data between clinical and public health systems electronically thus enabling the delivery data for those who needs to know in real time.

The ***main challenge*** for both clinical participants (senders) and public health participants (receivers) of EHR-based reporting, with the small exception of vendors participating in IHE Connectation and HIMSS Interoperability Showcases, was the ***overwhelming and alarming lack of awareness about standards***, in general, and CDA-specific standards (both content and information exchange standards), in particular.

4. What are implementation challenges from the public health agency perspective; what are the needs (technical, resources, education, etc.) to advance adoption and use of standards by public health agencies?

The following are the implementation challenges and needs for standards adoption from the public health agency perspectives:

Standards

- ***Lack of standards and, especially, interoperability standards*** to support public health practices and research
- ***Low level of maturity*** of existing standards

Standards-based Products

- ***Absence of public health information systems certification program*** to assure that standards-based IT products are used in Public Health
- ***Lack of incentives*** for both EHR and public health IT vendors to transition to costly standards-based IT solutions for public health reporting and data sharing

Personnel/Workforce

- ***Lack of IT personnel*** with overall awareness and required technical knowledge about HIT standards
- ***Lack of program personnel*** with overall awareness and needed business and technical knowledge on HIT standards to communicate program (user) needs into the standard development process
- ***Almost absolute absence of personnel designated to represent the agency's interests/perspectives*** in the national HIT standardization initiatives, at the Federal, State and Local levels.

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

4. What are implementation challenges from the public health agency perspective; what are the needs (technical, resources, education, etc.) to advance adoption and use of standards by public health agencies?

The following are the implementation challenges and needs for standards adoption from the public health agency perspectives: (continued):

Infrastructure

- ***Absence of the national infrastructure needed to support HIT standardization in Public Health*** including:
  - ***no process for identifying and prioritizing the need for HIT standards*** for Public Health - all current activities are ad hoc, they depend today on the interest, leadership, and vision of certain individuals within the federal government rather than on the alignment with the Healthy People 20X20 goals or Learning Health System goals
  - ***no infrastructure for coordination*** of standards development, maintenance and cross-harmonization of standards developed for specific public health programs and levels of government
  - ***no infrastructure for continuing maintenance*** of already developed standards
  - ***no infrastructure for coordination of standards deployment*** such as
    - no public health information systems certification program(s)
    - no entity (laboratory, deployment workshop, etc.) for sharing experience and lessons learned with the deployment of standard-based solutions

4. What are implementation challenges from the public health agency perspective; what are the needs (technical, resources, education, etc.) to advance adoption and use of standards by public health agencies?

The following are the implementation challenges and needs for standards adoption from the public health agency perspectives (continued):

Funding

- ***Absence of funding to support HIT standardization in Public Health*** that results in the following challenges related to the workforce and HIT standardization infrastructure:

  Public Health Workforce on HIT Standards

  - ***no HIT standards personnel positions*** in agencies to lead and coordinate standardization efforts within the agency and with health information exchange partners
  - ***no support for participation of the agencies' lead/liaisons/representatives*** in the HIT standardization entities
  - ***no support for the primary and continuing education on HIT standards*** for both program staff and IT staff, especially with the closure of the ONC funded University-based Training Grants

4. What are implementation challenges from the public health agency perspective; what are the needs (technical, resources, education, etc.) to advance adoption and use of standards by public health agencies?

The following are the implementation challenges and needs for standards adoption from the public health agency perspectives (continued):

Funding

- ***Absence of funding to support HIT standardization in Public Health*** that results in the following challenges related to the workforce and HIT standardization infrastructure:

  Public Health Infrastructure on HIT Standards

  - ***no support of the establishment of the national infrastructure on HIT standardization*** for Public Health including the development and maintenance of (a) the repository of regulatory documents on public health standardization and (b) Public Health Reporting and Data Exchange Knowledgebase of public health reporting guidelines, reporting triggers, common public health data models integral with the clinical data, repository of interoperability standards, tools for testing, certification and deployment of standardized IT products
  - ***no support for the coordination of the standardization efforts between public health agencies at all levels of government***
  - ***no support for the coordination of the standardization efforts between public health agencies and its partners/stakeholders in health information exchanges*** such clinical and non-clinical entities who submit data to public health and use public health data in their services

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

5. How is privacy and security covered in public health data standards? Are there privacy and security elements embedded in the standards? Is privacy and security under a different workflow process?

We believe that privacy and security are an essential requirement for the electronic data reporting and data sharing for Public Health. Privacy and security are not under a different workflow process but are an embedded step(s) in the flow of events of every use case for which standards are developed.

In the IHE public health content profiles, consent standards and other privacy and security standards are embedded in the standards.

5. What security standards should apply to what types of data possessed by public health?

In 2012, PHDSC in partnership with APHL and the support from CDC published the White Paper entitled

Assure HIT Standards for Public Health:

Part 1. HIT Standards in Public Health Laboratory Domain

Part 2. A Roadmap on for HIT Standardization for Public Health Laboratories

Appendix 2 (Part 1) contains the list of security standards for public health laboratory domain.

We believe that these security standards are also applicable to other public health domains.

Appendix 2. Privacy and Security Standards

There are a number of security and privacy standards that can support public health laboratory data exchanges. These standards enable transport security, identification of persons and systems, privilege management and access controls, audit, policy agreements, and pseudonymization. These standards are generic and must be support by any systems participating in electronic health information exchanges. The table below provides description of these standards.

Standards Organization	Standard	Standard Identifier	Description
American National Standards Institute (ANSI) International Committee for Information Technology Standards Inter-National Committee for Information Technology Standards	Information Technology - Role Based Access Control	#359-2004	This standard describes RBAC features that have achieved acceptance in the commercial marketplace. It includes a reference model and functional specifications for the RBAC features defined in the reference model. It is intended for (1) software engineers and product development managers who design products incorporating access control features; and (2) managers and procurement officials who seek to acquire computer security products with features that provide access control capabilities in accordance with commonly known and understood terminology and functional. Visit www.ansi.org for more information
American Society for Testing and Materials (ASTM) Standard	Specification for Audit and Disclosure Logs for Use in Health Information Systems	# E2147-01	E2147-01 "is for the development and implementation of security audit/disclosure logs for health information. It specifies how to design an access audit log to record all access to patient identifiable information maintained in computer systems and includes principles for developing policies, procedures, and functions of health information logs to document all disclosure of health information to external users for use in manual and computer systems. The process of information disclosure and auditing should conform, where relevant, with the Privacy Act of 1974 (1)." Visit www.astm.org for more information
Centers for Medicare and Medicaid Services (CMS)	National Provider Identifier (NPI)		NPI is a unique 10-digit identification number issued to healthcare providers in the United States by the Centers for Medicare and Medicaid Services (CMS). All individual HIPAA covered healthcare providers (physicians, nurses, dentists, chiropractors, physical therapists, etc.) or organizations (hospitals, home healthcare agencies, nursing homes, residential treatment centers, group practices, laboratories, pharma-

Sources:

Public Health Data Standards Consortium (PHDSC). Standards for Public Health Laboratory Data Exchange. URL: http://phdsc.org/standards/phlab-data-exchange.asp

Public Health Data Standards Consortium (PHDSC). Assure Health IT Standards for Public Health. White Paper Part 1 Health IT Standards for Public Health Laboratory Domain. 2012. URL: http://www.phdsc.org/standards/pdfs/PHDSC-APHL_PHL_Standards_White-Paper_Part-1FINAL_v1.pdf

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

7. What interoperability standards are needed for transfer of data from electronic health records to public health?

American Health Information Community (AHIC) Biosurveilance Use Case Charge:

"*Transmit essential data* <about 40 data elements> *from electronically enabled healthcare to authorized public health agencies in real-time*."

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Health Information Technology Standards Panel (HITSP). Biosurveillance Interoperability Specification (IS-02).
URL:http://www.hitsp.org/InteroperabilitySet_Details.aspx?MasterIS=true&InteroperabilityId=49&PrefixAlpha=1&APrefix=IS&PrefixNumeric=02

7. What interoperability standards are needed for transfer of data from electronic health records to public health?

Health IT Standards Categories

1. Data Standards
2. Information Content Standards
3. Information Exchange Standards
4. Identifiers Standards
5. Privacy and Security Standards
6. Functional Standards
7. Other

This classification of HIT standards types has been developed by the Health Information Technology Standards Panel (HITSP, www.hitsp.org) in 2006

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

Standards for Biosurveillance Use Case

Health IT Standards Categories

1.	Data Standards	28
2.	Information Content Standards	17
3.	Information Exchange Standards	46
4.	Identifiers Standards	11
5.	Privacy and Security Standards	5
6.	Functional Standards = 0	0
	Total	**107**

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Health Information Technology Standards Panel (HITSP). Biosurveillance Interoperability Specification (IS-02).
URL:http://www.hitsp.org/InteroperabilitySet_Details.aspx?MasterIS=true&InteroperabilityId=49&PrefixAlpha=1&APrefix=IS&PrefixNumeric=02

7. What interoperability standards are needed for transfer of data from electronic health records to public health?

Naming 1 standard in MU regulation, e.g. HL7 2.5.1 for laboratory reporting, immunization and syndromic surveillance, <u>could not enable interoperability</u> when other standards (see Biosurveillance Use Case example above) were not specified …

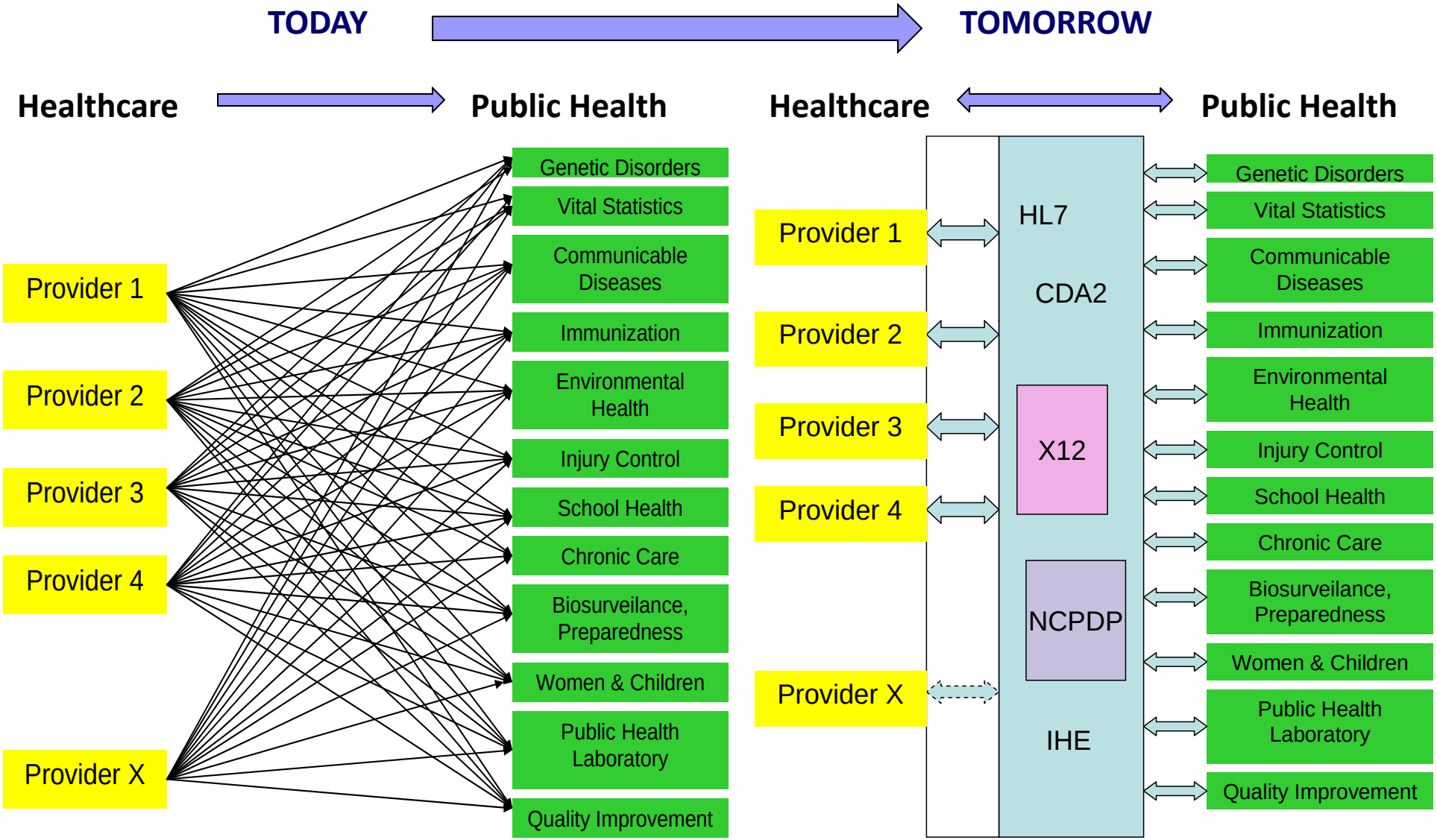
PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Health Information Technology Standards Panel (HITSP). Biosurveillance Interoperability Specification (IS-02).
URL:http://www.hitsp.org/InteroperabilitySet_Details.aspx?MasterIS=true&InteroperabilityId=49&PrefixAlpha=1&APrefix=IS&PrefixNumeric=02

PHDSC Proposed Call to Action

To transition Public Health infrastructure into standards-based HIT, we propose to work with the federal government to establish a ***National Public Health Standardization Framework for 21 Century: Strengthening PH Infrastructure and Supporting Federal, State and Local PH Agencies*** with proper resources to be quantified and allocated to support public health participation in the national and international HIT standardization process.

From Connectivity to Interoperability Through Standards



Customized Point-to-Point Interfaces → **Standards-based Information Exchange Infrastructure**

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC Promoting Standards Through Partnerships

About PHDSC

- History
- Membership
- Mission
- Strategic Priorities
- Activities

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

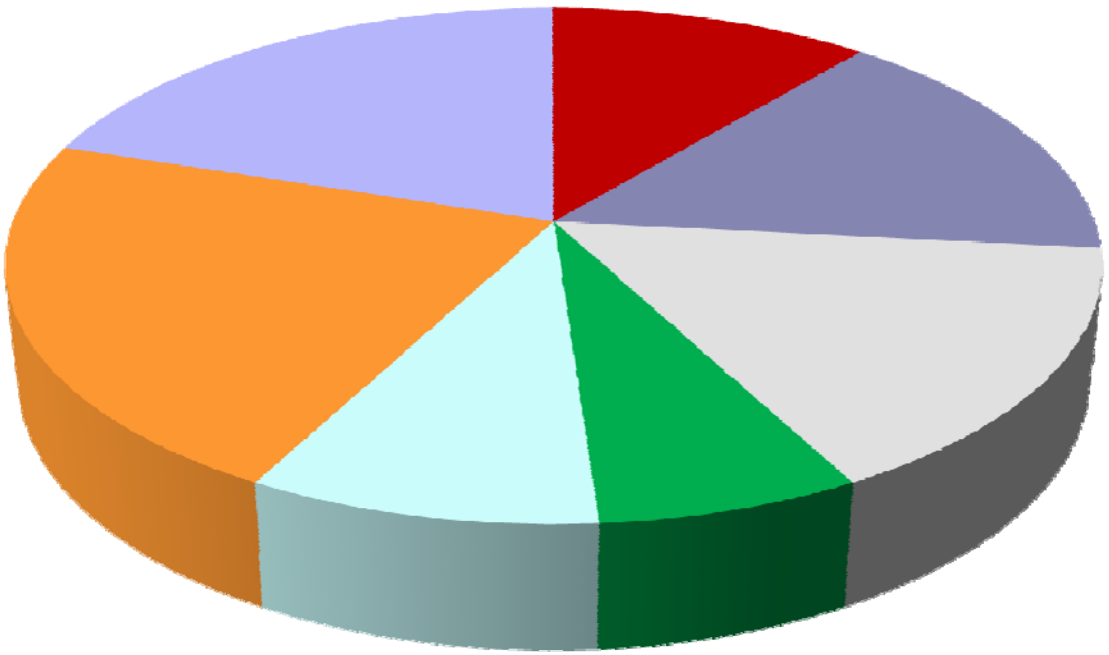
About the PHDSC

- The Consortium was established in response to the 1996 Health Insurance Portability and Accountability Act (HIPAA) at a 1998 Workshop that explored the implications of HIPAA for the practice of public health and health services research.

- In 2003, the Consortium became a not-for profit organization

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

PHDSC Membership - 2013

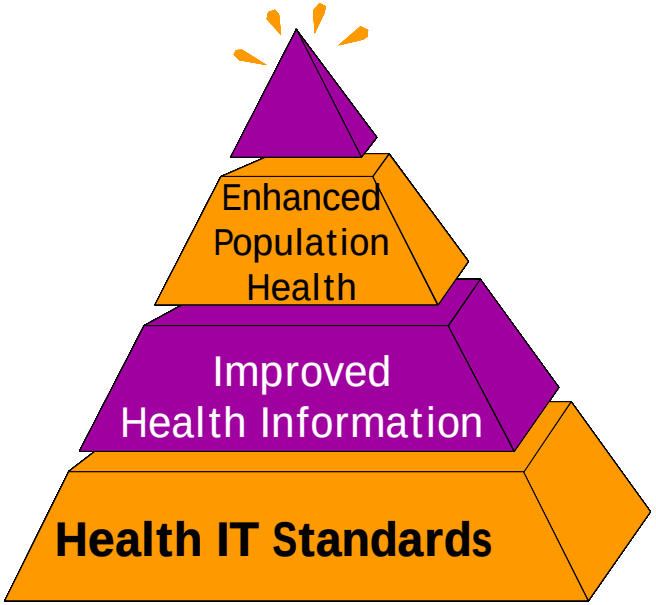


- Federal Agencies
- State & Local Agencies
- Professional Membership Organizations
- Other Professional Organizations
- Academia
- For-Profit Organizations
- Individual Members

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

PHDSC's Mission

PHDSC is committed to bring a common voice from the public health community to the national efforts of standardization of health and healthcare information



PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

PHDSC Strategic Priorities

- ***Represent public health interests*** *(local, state and federal agencies and research communities) in the standards development, harmonization and maintenance activities* by participation in the standard development (SDOs), data content committees (DCCCs), standard harmonization entities and other healthcare standardization-related efforts

- ***Promote interoperability*** of health-related data systems to meet the health data needs of public and private organizations, agencies and individuals

- ***Educate*** *clinical and public health professionals about standards and systems interoperability, and vendors and clinicians about public health*

PUBLIC HEALTH DATA STANDARDS CONSORTIUM
PHDSC
Promoting Standards Through Partnerships

Become A Member

PHDSC Data Standards Committee

PHDSC Payer Typology Sub-Committee

PHDSC Health Care Services Data Reporting Guide Sub-Committee

Health Information Technology Standards

Health Information Technology Standardization Panel (HITSP)

Certification Commission of Health Information Technology (CCHIT)

Health Information Technology Definitions Project

Health Information Technology Standards

Table of Contents

- Definitions of Standardization, Standard and Standards Categories
- Health Information Technology Standardization
- Health Information Exchange Priorities
- Standards Development
  - Data Standards
  - Information Content Standards
  - Information Exchange Standards
  - Identifiers Standards
  - Privacy and Security Standards
  - Functional Standards
  - Other Standards
- Standards Harmonization
- Certification of Standards-Based Health IT Products
- Implementation of Standards-Based Specifications
- Adoption of Standards-Based Health IT Products

Get Involved!

Anna Orlova, PhD, Executive Director
111 South Calvert Street Suite 2700 Baltimore MD 21202
Phone: 410-385-5272 Fax: 866-637-6526 E-mail: aorlova@jhsph.edu

PUBLIC HEALTH DATA STANDARDS CONSORTIUM PHDSC